

Application Data Sheet

Application Information

Application number::

Filing Date:: 01/13/2006

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: TREATMENT OF ANEMIA

Attorney Docket Number:: 50304/009003

Request of Early Publication?:: No

Request of Non-Publication?:: No

Suggested Drawing Figure:: 5

Total Drawing Sheets:: 5

Small Entity?:: Yes

Petition Included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?: No

Applicant Information

Applicant Authority Type: Inventor

Primary Citizenship Country: Switzerland

Status: Full Capacity

Given Name: Anne

Middle Name:

Family Name: ANGELILLO-SCHERRER

Name Suffix:

City of Residence: Vésenaz

State or Province of Residence:

Country of Residence: Switzerland

Street of mailing address: 7, Chaussée des Champs-de-Chaux

City of mailing address: Vésenaz

State or Province of mailing address:

Country of mailing address: Switzerland

Postal or Zip Code of mailing address: 1222

Applicant Authority Type: Inventor

Primary Citizenship Country: Belgium

Status: Full Capacity

Given Name: Peter

Middle Name:

Family Name:: CARMELIET
Name Suffix::
City of Residence:: Oud-Heverlee
State or Province of Residence::
Country of Residence:: Belgium
Street of mailing address:: Sapellenbos 10
City of mailing address:: Oud-Heverlee
State or Province of mailing address::
Country of mailing address:: Belgium
Postal or Zip Code of mailing address:: B-3052

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Belgium
Status:: Full Capacity
Given Name:: Désiré
Middle Name::
Family Name:: COLLEN
Name Suffix::
City of Residence:: Winksele
State or Province of Residence::
Country of Residence:: Belgium
Street of mailing address:: Schoonzichtlaan 20
City of mailing address:: Winksele
State or Province of mailing address::

Country of mailing address:: Belgium

Postal or Zip Code of mailing address:: B-3020

Correspondence Information

Correspondence Customer Number:: 21559

Representative Information

Representative Customer Number:: 21559

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National stage of	PCT/BE2004/000105	July 19, 2004
This Application	An application claiming the benefit under 35 USC 119(e)	60/487,905	July 17, 2003
This Application	An application claiming the benefit under 35 USC 119(e)	60/547,842	February 26, 2004

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
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Assignee Information

Assignee name::

Street of mailing address::

City of mailing address::

State of Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::